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(Original Signature of Member)

118TH CONGRESS
1ST SESSION

H. R. _____

To establish a home-based telemental health care demonstration program for purposes of increasing mental health and substance use services in rural medically underserved populations and for individuals in farming, fishing, and forestry occupations.

IN THE HOUSE OF REPRESENTATIVES

Ms. SALINAS introduced the following bill; which was referred to the
Committee on _____

A BILL

To establish a home-based telemental health care demonstration program for purposes of increasing mental health and substance use services in rural medically underserved populations and for individuals in farming, fishing, and forestry occupations.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Home-Based Tele-
5 mental Health Care Act of 2023”.

1 **SEC. 2. FINDINGS.**

2 Congress finds as follows:

3 (1) According to a 2020 report by the Centers
4 for Disease Control and Prevention, titled “Mental
5 Health, Substance Use and Suicidal Ideation during
6 the COVID–19 Pandemic” (referred to in this sec-
7 tion as the “CDC report”), elevated levels of adverse
8 mental health conditions, substance use, and suicidal
9 ideation were reported by adults in the United
10 States in June 2020, after the onset of the COVID–
11 19 pandemic. The prevalence of symptoms of anxiety
12 disorder was 25.5 percent, compared to 8.1 percent
13 in the second quarter of 2019. Additionally, 24.3
14 percent of adults experienced depressive symptoms
15 in June 2020, 4 times the 6.5 percent reported in
16 the second quarter of 2019.

17 (2) According to the CDC report, approximately
18 30 percent of rural adults who responded to a survey
19 of the Centers for Disease Control and Prevention
20 suffered from symptoms of anxiety or depression,
21 and approximately 10 percent of rural adults seri-
22 ously considered suicide in the past 30 days.

23 (3) A 2020 study by the Centers for Disease
24 Control and Prevention suggests that people in
25 farming, fishing, and forestry occupations (referred
26 to in this section as the “Triple–F” industry) in the

1 United States experienced rates of 31.4 suicides per
2 100,000 people in 2016.

3 (4) Such 2020 study by the Centers for Disease
4 Control and Prevention indicates that suicide rates
5 for farmers, ranchers, and other agricultural man-
6 agers were 58 percent higher than the rate for the
7 general population in 2016.

8 (5) According to a 2019 report of the National
9 Survey on Drug Use and Health, 22.4 percent of
10 residents in rural communities aged 18 or older who
11 experienced mental illness perceived an unmet need
12 for mental health services. Of these individuals, 17.9
13 percent did not receive any mental health services in
14 the prior year.

15 (6) The COVID-19 pandemic put additional
16 stress on people in the Triple-F population. In the
17 early stages, the pandemic caused instability in the
18 markets, especially as the virus caused a downturn
19 in food service sales and closed meat processing
20 plants across the Nation. Farmers were left with low
21 commodity prices and loss of revenue. This commu-
22 nity has spent the last 2 years attempting to re-
23 bound from the effects of the pandemic. Additional
24 resources are needed to support the mental health
25 needs of this population.

1 (7) While the prevalence of mental illness is
2 similar among rural and urban residents, the serv-
3 ices available to each population are very different.
4 Mental health care needs are not met in rural com-
5 munities due to many challenges, including accessi-
6 bility issues due to transportation and geographic
7 isolation, the stigma of needing or receiving mental
8 health care, a lack of anonymity when seeking treat-
9 ment, shortages of mental health workforce profes-
10 sionals, and affordability due to a high rate of unin-
11 sured residents.

12 (8) Telemental health, which is the delivery of
13 mental health services using remote technologies
14 when the patient and provider are separated by dis-
15 tance, shows promise in helping to alleviate the lack
16 of mental health services in rural areas. Traditional
17 telemental health models involve care delivered to a
18 patient at an originating clinical site from a spe-
19 cialist working at a distant site. Having the ability
20 to reach mental health professionals from a place of
21 comfort, such as home, from a personal device may
22 reduce challenges faced in rural areas and amongst
23 Triple-F workers.

24 (9) A clinical trial of 241 depressed elderly vet-
25 erans, which was conducted by the Medical Univer-

1 sity of South Carolina and the Ralph H. Johnson
2 Veterans Affairs Medical Center and reported in the
3 Journal of Clinical Psychiatry, found that home-
4 based telemental health for depression is well re-
5 ceived by patients and delivers as good a quality of
6 life as in-person visits.

7 **SEC. 3. MENTAL HEALTH AND SUBSTANCE USE SERVICES**
8 **DELIVERED TO RURAL UNDERSERVED POPU-**
9 **LATIONS VIA TELEMENTAL HEALTH CARE.**

10 Title III of the Public Health Service Act is amended
11 by inserting after section 330K (42 U.S.C. 254c–16) the
12 following:

13 **“SEC. 330K–1. MENTAL HEALTH AND SUBSTANCE USE SERV-**
14 **ICES DELIVERED TO RURAL UNDERSERVED**
15 **POPULATIONS VIA TELEMENTAL HEALTH**
16 **CARE.**

17 “(a) DEFINITIONS.—In this section—

18 “(1) the term ‘covered populations’ means—

19 “(A) health professional shortage areas (as
20 defined in section 332(a)(1)) in rural areas; or

21 “(B) populations engaged in a farming,
22 fishing, or forestry industry;

23 “(2) the term ‘eligible entity’ means a public or
24 nonprofit private telemental health provider network
25 that offers services that include mental health and

1 substance use services provided by professionals
2 trained in mental health and substance use;

3 “(3) the term ‘farming, fishing, or forestry in-
4 dustry’ means an occupation defined as a farming,
5 fishing, or forestry occupation by the Department of
6 Labor in accordance with the Standard Occupational
7 Classification System;

8 “(4) the term ‘home-based telemental’ means
9 the use of telemental health services where the pa-
10 tient is in his or her own home or other place of
11 comfort;

12 “(5) the term ‘professional trained in mental
13 health’ means a psychiatrist, a qualified mental
14 health professional (as defined in section 330K), or
15 another mental health professional acting under the
16 direction of a psychiatrist;

17 “(6) the term ‘rural’ has the meaning given
18 such term by the Office of Rural Health Policy of
19 the Health Resources and Services Administration;
20 and

21 “(7) the term ‘telemental health’ means the use
22 of electronic information and telecommunications
23 technologies to support long distance clinical health
24 care, patient and professional health-related edu-
25 cation, public health, and health administration.

1 “(b) PROGRAM AUTHORIZED.—The Secretary, in
2 consultation with the Rural Health Liaison of the Depart-
3 ment of Agriculture, shall award grants to eligible entities
4 to establish demonstration projects for the provision of
5 mental health and substance use services to covered popu-
6 lations in their homes, as delivered remotely by profes-
7 sionals trained in mental health and substance use using
8 telemental health care.

9 “(c) USE OF FUNDS.—Recipients of a grant under
10 this section shall use the grant funds to—

11 “(1) deliver home-based telemental health serv-
12 ices to covered populations; and

13 “(2) develop comprehensive metrics to measure
14 the quality and impact of home-based telemental
15 health services compared to traditional in-person
16 mental health and substance use care.

17 “(d) REPORT.—The Secretary, in consultation with
18 the Secretary of Agriculture, not later than 3 years after
19 the date on which the program under this section com-
20 mences, and 2 years thereafter, shall submit to the appro-
21 priate congressional committees reports on the impact and
22 quality of care of home-based telemental health care serv-
23 ices for covered populations.

24 “(e) AUTHORIZED USE OF FUNDS.—Out of any
25 amounts made available to the Secretary, up to

- 1 \$10,000,000 for each of fiscal years 2024 through 2028
- 2 may be allocated to carrying out the program under this
- 3 section.”.